

PTO/SB/30 (8/2000)

Approved for use through 10/31/2002 OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL**Subsection (b) of 35 U.S.C. § 132, effective on May 29, 2000,
provides for continued examination of a utility or plant application
filed on or after June 8, 1995,
See the American Inventors Protection Act of 1999 (AIPA).

Application Number	09/764,688
Filing Date	01/16/2001
First Named Inventor	Fitzmaurice
Group Art Unit	2876
Examiner Name	Uyen Chaun N Le
Attorney Docket Number	40655.0100

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.

NOTE: 37 C.F.R. § 1.114 is effective on May 29, 2000. If the above-identified application was filed prior to May 29, 2000, applicant may wish to consider filing a continued prosecution application (CPA) under 37 C.F.R. § 1.53 (d) (PTO/SB/29) instead of an RCE to be eligible for the patent term adjustment provisions of the AIPA. See Changes to Application Examination and Provisional Application Practice, Final Rule, 65 Fed. Reg. 50092 (Aug. 16, 2000); Interim Rule, 65 Fed. Reg. 14865 (Mar. 20, 2000); 1233 Off. Gaz. Pat. Office 47 (Apr. 11, 2000), which established RCE Practice.

1. **Submission required under 37 C.F.R. § 1.114.**a. ☐ Previously submitted

- i. ☐ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- iii. ☐ Other _____

b. ☒ Enclosed

- i. ☒ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☒ Other **Response Transmittal**

2. **Miscellaneous**

- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _____ months (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)
- b. ☐ Other _____

3. **Fees**

The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.

- a.
- ☒
- The Director is hereby authorized to charge the following fees, or credit any overpayments, to

Deposit Account No. **19-2814**

- i. ☒ RCE fee required under 37 C.F.R. § 1.17(e) **12/03/2002 AMONDAF1 00000118 09764688**
 - ii. ☒ Extension of time fee (37 C.F.R. §§ 1.136 and 1.17) **01 FC:1801** **740.00 OP**
 - iii. ☐ Other _____
- b. ☒ Check in the amount of \$ **850.00** enclosed
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print / Type)

David P. Wood

Registration No. (Attorney / Agent)

45,932

Signature

Date

11/27/2002

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Name (Print / Type)

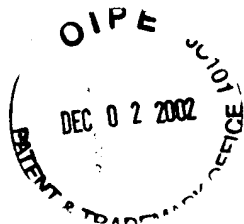
DAVID P. WOOD

Signature

Date

11/27/02

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.



RCE 12800

PATENT

**IN THE UNITED STATES PATENT AND
TRADEMARK OFFICE**

RESPONSE TRANSMITTAL

Applicant: Mary Ann Fitzmaurice Docket No.: 40655.0100
Serial No.: 09/764,688 Client Ref:
Filing Date: January 16, 2001 Group Art Unit: 2876
Title: **MULTIPLE-SERVICE CARD SYSTEM** Examiner: Le, Uyen-Chau N.

ASSISTANT COMMISSIONER FOR PATENTS
Box RCE
Washington, D.C. 20231

Dear Sir/Madam:

Attached herewith is a Response to the Final Office Action mailed on July 29, 2002, the period for which to reply is hereby extended by one month to November 29, 2002, in the above-identified application.

FEE CALCULATION, CLAIMS AS AMENDED:

	Claims remaining after amendment		Highest number previously paid for		Present Extra		Additional Fee
Total Effective Claims	23	minus	25	=	0	x \$ 18.00 =	0.00
Independent Claims	4	minus	4	=	0	x \$ 78.00 =	0.00
If amendment enters proper multiple dependent claim(s) into this application for first time (per application)						\$260.00 +	N/A
						Subtotal:	0.00

Fee Calculation: Request For Continued Examination pursuant to 37 C.F.R. § 1.17(e) 740.00

Fee Calculation: Request for Extension of Time pursuant to 37 C.F.R. §1.136(a)

[X] Response filed within **first** month after due date – add \$ 110.00 110.00
[] Response filed within **second** month after due date – add \$ 400.00

[] Response filed within **third** month after due date – add \$ 920.00
[] Response filed within **fourth** month after due date – add \$1440.00
[] Response filed within **fifth** month after due date – add \$1960.00
TOTAL: 110.00

If one of the "small entity" boxes above is checked, enter half (½)
of the second subtotal and **subtract**.

Information Disclosure Statement Pursuant to 37 C.F.R. §§1.97-1.98 NA

TOTAL ADDITIONAL FEE ENCLOSED: \$850.00

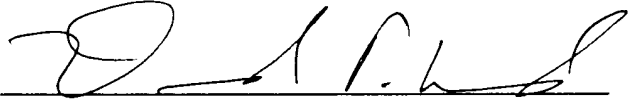
[] Please charge Deposit Account No. 19-2814 in the amount of \$0.00.

A duplicate copy of this sheet is attached.

[X] Check No. 54480 in the amount of \$ 850.00 is attached.

This statement does NOT authorize charge of the issue fee. The Commissioner is hereby authorized to charge any other fee specifically authorized hereafter, or any **deficiency** in the fee(s) filed, or asserted to be filed, or which should have been filed herewith or concerning any paper filed hereafter, and which may be required under 37 C.F.R. §§1.16-1.18 (**deficiency** only) now or hereafter relative to this Application and the resulting Official document under 37 C.F.R. §1.20, or credit any overpayment to Account No. 19-2814 for **which purpose a duplicate copy of this sheet is attached.**

Respectfully submitted,

By: 
David P. Wood
Reg. No. 45,932

Dated: November 27, 2002

SNELL & WILMER, L.L.P.
One Arizona Center
400 East Van Buren
Phoenix, Arizona 85004-2202
Phone: (602) 382-6219
Fax: (602) 382-6070

CERTIFICATE OF MAILING BY FIRST CLASS MAIL (37 CFR 1.8)Applicant(s): **FITZMAURICE, et al.**

Docket No.

40655.0100

Serial No.

09/764,688

Filing Date

January 16, 2001

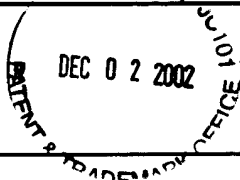
Examiner

Le, Uyen-Chau N.

Group Art Unit

2876

Invention:

MULTIPLE-SERVICE CARD SYSTEMI hereby certify that this **Response Transmittal***(Identify type of correspondence)*

is being deposited with the United States Postal Service as first class mail in an envelope addressed to: The

Assistant Commissioner for Patents, Washington, D.C. 20231 on

November 27, 2002*(Date)***David P. Wood***(Typed or Printed Name of Person Mailing Correspondence)**(Signature of Person Mailing Correspondence)***Note: Each paper must have its own certificate of mailing.**

<input type="checkbox"/>	Response filed within third month after due date – add	\$ 920.00	
<input type="checkbox"/>	Response filed within fourth month after due date – add	\$1440.00	
<input type="checkbox"/>	Response filed within fifth month after due date – add	\$1960.00	
	TOTAL:		110.00

If one of the "small entity" boxes above is checked, enter half (½)
of the second subtotal and **subtract**.
Information Disclosure Statement Pursuant to 37 C.F.R. §§1.97-1.98

NA

TOTAL ADDITIONAL FEE ENCLOSED: \$850.00

- ☐ Please charge Deposit Account No. 19-2814 in the amount of \$0.00.
A duplicate copy of this sheet is attached.
- ☒ Check No. 54480 in the amount of \$ 850.00 is attached.

This statement does NOT authorize charge of the issue fee. The Commissioner is hereby authorized to charge any other fee specifically authorized hereafter, or any **deficiency** in the fee(s) filed, or asserted to be filed, or which should have been filed herewith or concerning any paper filed hereafter, and which may be required under 37 C.F.R. §§1.16-1.18 (**deficiency** only) now or hereafter relative to this Application and the resulting Official document under 37 C.F.R. §1.20, or credit any overpayment to Account No. 19-2814 for **which purpose a duplicate copy of this sheet is attached.**

Respectfully submitted,

By:



David P. Wood
Reg. No. 45,932

Dated: November 27, 2002

SNELL & WILMER, L.L.P.
One Arizona Center
400 East Van Buren
Phoenix, Arizona 85004-2202
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Fax: (602) 382-6070

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

09/764688

RCE

TOTAL CLAIMS	NUMBER FEEL	NUMBER EXTRA
FOR		
TOTAL CHARGEABLE CLAIMS	21 minus 29 =	
INDEPENDENT CLAIMS	4 minus 4 =	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 21	Minus ** 29	=
Independent	* 4	Minus *** 4	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

AMENDMENT	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

AMENDMENT	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	370.00
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	FEE
BASIC FEE	740.00
X\$18=	
X84=	
+280=	
TOTAL	740

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	